

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

PRIME THERAPEUTICS LLC EMPLOYEE PAC (PRIMEPAC)

ADDRESS (number and street)

1305 CORPORATE CENTER DRIVE

☐ Check if different than previously reported. (ACC)

EAGAN

MN

55121

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00498105

3. IS THIS
REPORT☐NEW
(N)

OR

☒AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☒ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
07 01 2014

through

M M M / D D D / Y Y Y Y Y Y
09 30 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Aaron Rodriguez

Signature of Treasurer

Aaron Rodriguez

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
11 19 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

PRIME THERAPEUTICS LLC EMPLOYEE PAC (PRIMEPAC)

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
07 / 01 / 2014 To: M M / D D / Y Y Y Y Y Y
09 / 30 / 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2014		24267.94
(b) Cash on Hand at Beginning of Reporting Period.....	27159.12	
(c) Total Receipts (from Line 19)	8595.03	24367.84
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	35754.15	48635.78
7. Total Disbursements (from Line 31)	9604.92	22486.55
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	26149.23	26149.23
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

PRIME THERAPEUTICS LLC EMPLOYEE PAC (PRIMEPAC)

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	4

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	7692.53	16767.73
(ii) Unitemized	902.50	7600.11
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ►	8595.03	24367.84
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	8595.03	24367.84
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ►	8595.03	24367.84
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	8595.03	24367.84

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	104.92	2486.55
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	104.92	2486.55
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	9500.00	20000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	9604.92	22486.55
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	9604.92	22486.55

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	8595.03	24367.84
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	8595.03	24367.84
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	104.92	2486.55
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	104.92	2486.55

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 70

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PRIME THERAPEUTICS LLC EMPLOYEE PAC (PRIMEPAC)

Full Name (Last, First, Middle Initial)

A. Duane Barnes

Mailing Address 1305 corporate center dr

City State Zip Code
eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics LLC

Occupation

Senior Vlce President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2692.34

Date of Receipt

07 / 03 / 2014

Transaction ID : SA11AI.4728

Amount of Each Receipt this Period

192.31

payroll deduction

Full Name (Last, First, Middle Initial)

B. Duane Barnes

Mailing Address 1305 corporate center dr

City State Zip Code
eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics LLC

Occupation

Senior Vlce President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2884.65

Date of Receipt

07 / 18 / 2014

Transaction ID : SA11AI.4772

Amount of Each Receipt this Period

192.31

payroll deduction

Full Name (Last, First, Middle Initial)

C. Duane Barnes

Mailing Address 1305 corporate center dr

City State Zip Code
eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics LLC

Occupation

Senior Vlce President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3076.96

Date of Receipt

08 / 01 / 2014

Transaction ID : SA11AI.4799

Amount of Each Receipt this Period

192.31

payroll deduction

SUBTOTAL of Receipts This Page (optional)..... ►

576.93

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 70

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

PRIME THERAPEUTICS LLC EMPLOYEE PAC (PRIMEPAC)

Full Name (Last, First, Middle Initial)

A. Duane Barnes

Mailing Address 1305 corporate center dr

City State Zip Code
eagan MN 55121

FEC ID number of contributing federal political committee.

C

Name of Employer

Prime Therapeutics LLC

Occupation

Senior Vlce President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3269.27

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 15 / 2014

Transaction ID : SA11AI.4800

Amount of Each Receipt this Period

192.31

payroll deduction

Full Name (Last, First, Middle Initial)

B. Duane Barnes

Mailing Address 1305 corporate center dr

City State Zip Code
eagan MN 55121

FEC ID number of contributing federal political committee.

C

Name of Employer

Prime Therapeutics LLC

Occupation

Senior Vlce President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3461.58

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 29 / 2014

Transaction ID : SA11AI.4881

Amount of Each Receipt this Period

192.31

Payroll deduction

Full Name (Last, First, Middle Initial)

C. Duane Barnes

Mailing Address 1305 corporate center dr

City State Zip Code
eagan MN 55121

FEC ID number of contributing federal political committee.

C

Name of Employer

Prime Therapeutics LLC

Occupation

Senior Vlce President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3653.89

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 12 / 2014

Transaction ID : SA11AI.4882

Amount of Each Receipt this Period

192.31

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

576.93

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

PRIME THERAPEUTICS LLC EMPLOYEE PAC (PRIMEPAC)

Full Name (Last, First, Middle Initial)

A. Duane Barnes

Mailing Address 1305 corporate center dr

City State Zip Code
eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics LLC

Occupation

Senior Vlce President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.20

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 26 / 2014

Transaction ID : SA11AI.4983

Amount of Each Receipt this Period

192.31

Payroll Deduction

Full Name (Last, First, Middle Initial)

B. Terry Baumgard

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

VP Corporate Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 03 / 2014

Transaction ID : SA11AI.4719

Amount of Each Receipt this Period

25.00

payroll deduction

Full Name (Last, First, Middle Initial)

C. Terry Baumgard

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

VP Corporate Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 18 / 2014

Transaction ID : SA11AI.4761

Amount of Each Receipt this Period

25.00

payroll deduction

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

242.31

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

PRIME THERAPEUTICS LLC EMPLOYEE PAC (PRIMEPAC)

Full Name (Last, First, Middle Initial)

A. Terry Baumgard

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

VP Corporate Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

08 / 01 / 2014

Transaction ID : SA11AI.4801

Amount of Each Receipt this Period

25.00

payroll deduction

Full Name (Last, First, Middle Initial)

B. Terry Baumgard

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

VP Corporate Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

08 / 15 / 2014

Transaction ID : SA11AI.4880

Amount of Each Receipt this Period

25.00

payroll deduction

Full Name (Last, First, Middle Initial)

C. Terry Baumgard

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

VP Corporate Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

08 / 29 / 2014

Transaction ID : SA11AI.4883

Amount of Each Receipt this Period

25.00

Payroll deduction

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

PRIME THERAPEUTICS LLC EMPLOYEE PAC (PRIMEPAC)

Full Name (Last, First, Middle Initial)

A. Terry Baumgard

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

VP Corporate Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 12 / 2014

Transaction ID : SA11AI.4884

Amount of Each Receipt this Period

25.00

payroll deduction

Full Name (Last, First, Middle Initial)

B. Terry Baumgard

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

VP Corporate Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 26 / 2014

Transaction ID : SA11AI.4984

Amount of Each Receipt this Period

25.00

payroll deduction

Full Name (Last, First, Middle Initial)

C. Aaron Bender

Mailing Address 1305 corporate center dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Sales Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 03 / 2014

Transaction ID : SA11AI.4721

Amount of Each Receipt this Period

17.50

payroll deduction

SUBTOTAL of Receipts This Page (optional)..... ►

67.50

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

PRIME THERAPEUTICS LLC EMPLOYEE PAC (PRIMEPAC)

Full Name (Last, First, Middle Initial)

A. Aaron Bender

Mailing Address 1305 corporate center dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Sales Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 18 / 2014

Transaction ID : SA11AI.4764

Amount of Each Receipt this Period

17.50

payroll deduction

Full Name (Last, First, Middle Initial)

B. Aaron Bender

Mailing Address 1305 corporate center dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Sales Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 01 / 2014

Transaction ID : SA11AI.4802

Amount of Each Receipt this Period

17.50

payroll deduction

Full Name (Last, First, Middle Initial)

C. Aaron Bender

Mailing Address 1305 corporate center dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Sales Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 15 / 2014

Transaction ID : SA11AI.4803

Amount of Each Receipt this Period

17.50

payroll deduction

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

52.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 70

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PRIME THERAPEUTICS LLC EMPLOYEE PAC (PRIMEPAC)

Full Name (Last, First, Middle Initial)

A. Aaron Bender

Mailing Address 1305 corporate center dr

City State Zip Code
 Eagan MN 55121

FEC ID number of contributing federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Sales Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
 08 / 29 / 2014

Transaction ID : SA11AI.4885

Amount of Each Receipt this Period

17.50

payroll deduction

Full Name (Last, First, Middle Initial)

B. Aaron Bender

Mailing Address 1305 corporate center dr

City State Zip Code
 Eagan MN 55121

FEC ID number of contributing federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Sales Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.50

Date of Receipt

M M / D D / Y Y Y Y Y
 09 / 12 / 2014

Transaction ID : SA11AI.4886

Amount of Each Receipt this Period

17.50

payroll deduction

Full Name (Last, First, Middle Initial)

C. Aaron Bender

Mailing Address 1305 corporate center dr

City State Zip Code
 Eagan MN 55121

FEC ID number of contributing federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Sales Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y
 09 / 26 / 2014

Transaction ID : SA11AI.4985

Amount of Each Receipt this Period

17.50

payroll deduction

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

52.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

PRIME THERAPEUTICS LLC EMPLOYEE PAC (PRIMEPAC)

Full Name (Last, First, Middle Initial)

A. Kyle Brua

Mailing Address 1305 corporate center dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

VP Pricing and Underwriting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

MM / DD / YYYY
07 / 03 / 2014

Transaction ID : SA11AI.4738

Amount of Each Receipt this Period

25.00

payroll deduction

Full Name (Last, First, Middle Initial)

B. Kyle Brua

Mailing Address 1305 corporate center dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

VP Pricing and Underwriting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

MM / DD / YYYY
07 / 18 / 2014

Transaction ID : SA11AI.4782

Amount of Each Receipt this Period

25.00

payroll deduction

Full Name (Last, First, Middle Initial)

C. Kyle Brua

Mailing Address 1305 corporate center dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

VP Pricing and Underwriting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY
08 / 01 / 2014

Transaction ID : SA11AI.4804

Amount of Each Receipt this Period

25.00

payroll deduction

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

PRIME THERAPEUTICS LLC EMPLOYEE PAC (PRIMEPAC)

Full Name (Last, First, Middle Initial)

A. Kyle Brua

Mailing Address 1305 corporate center dr

City
Eagan

State
MN

Zip Code
55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

VP Pricing and Underwriting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

08 / 15 / 2014

Transaction ID : SA11AI.4805

Amount of Each Receipt this Period

25.00

payroll deduction

Full Name (Last, First, Middle Initial)

B. Kyle Brua

Mailing Address 1305 corporate center dr

City
Eagan

State
MN

Zip Code
55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

VP Pricing and Underwriting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

08 / 29 / 2014

Transaction ID : SA11AI.4887

Amount of Each Receipt this Period

25.00

payroll deduction

Full Name (Last, First, Middle Initial)

C. Kyle Brua

Mailing Address 1305 corporate center dr

City
Eagan

State
MN

Zip Code
55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

VP Pricing and Underwriting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

09 / 12 / 2014

Transaction ID : SA11AI.4888

Amount of Each Receipt this Period

25.00

payroll deduction

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

PRIME THERAPEUTICS LLC EMPLOYEE PAC (PRIMEPAC)

Full Name (Last, First, Middle Initial)

A. Kyle Brua

Mailing Address 1305 corporate center dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

VP Pricing and Underwriting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 26 / 2014

Transaction ID : SA11AI.4986

Amount of Each Receipt this Period

25.00

payroll deduction

Full Name (Last, First, Middle Initial)

B. Michael Brzica

Mailing Address 1305 corporate center dr

City State Zip Code
eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Senior Director Government Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.50

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 15 / 2014

Transaction ID : SA11AI.4807

Amount of Each Receipt this Period

12.50

payroll deduction

Full Name (Last, First, Middle Initial)

C. Michael Brzica

Mailing Address 1305 corporate center dr

City State Zip Code
eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Senior Director Government Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 29 / 2014

Transaction ID : SA11AI.4889

Amount of Each Receipt this Period

12.50

payroll deduction

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

50.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

PRIME THERAPEUTICS LLC EMPLOYEE PAC (PRIMEPAC)

Full Name (Last, First, Middle Initial)

A. Michael Brzica

Mailing Address 1305 corporate center dr

City State Zip Code
eagan MN 55121

FEC ID number of contributing federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Senior Director Government Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

237.50

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 12 / 2014

Transaction ID : SA11AI.4890

Amount of Each Receipt this Period

12.50

payroll deduction

Full Name (Last, First, Middle Initial)

B. Michael Brzica

Mailing Address 1305 corporate center dr

City State Zip Code
eagan MN 55121

FEC ID number of contributing federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Senior Director Government Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 26 / 2014

Transaction ID : SA11AI.4987

Amount of Each Receipt this Period

12.50

payroll deduction

Full Name (Last, First, Middle Initial)

C. Mary Donaldson

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Department Coordinator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 29 / 2014

Transaction ID : SA11AI.4970

Amount of Each Receipt this Period

15.00

payroll deduction

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

40.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

PRIME THERAPEUTICS LLC EMPLOYEE PAC (PRIMEPAC)

Full Name (Last, First, Middle Initial)

A. James DuCharme

Mailing Address 1305 corporate center dr

City State Zip Code
eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics LLC

Occupation

Chief Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 03 / 2014

Transaction ID : SA11AI.4740

Amount of Each Receipt this Period

50.00

payroll deduction

Full Name (Last, First, Middle Initial)

B. James DuCharme

Mailing Address 1305 corporate center dr

City State Zip Code
eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics LLC

Occupation

Chief Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 18 / 2014

Transaction ID : SA11AI.4784

Amount of Each Receipt this Period

50.00

payroll deduction

Full Name (Last, First, Middle Initial)

C. James DuCharme

Mailing Address 1305 corporate center dr

City State Zip Code
eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics LLC

Occupation

Chief Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 01 / 2014

Transaction ID : SA11AI.4814

Amount of Each Receipt this Period

50.00

payroll deduction

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

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Full Name (Last, First, Middle Initial)

A. James DuCharme

Mailing Address 1305 corporate center dr

City State Zip Code
eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics LLC

Occupation

Chief Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 15 / 2014

Transaction ID : SA11AI.4815

Amount of Each Receipt this Period

50.00

payroll deduction

Full Name (Last, First, Middle Initial)

B. James DuCharme

Mailing Address 1305 corporate center dr

City State Zip Code
eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics LLC

Occupation

Chief Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 29 / 2014

Transaction ID : SA11AI.4895

Amount of Each Receipt this Period

50.00

payroll deduction

Full Name (Last, First, Middle Initial)

C. James DuCharme

Mailing Address 1305 corporate center dr

City State Zip Code
eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics LLC

Occupation

Chief Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 12 / 2014

Transaction ID : SA11AI.4896

Amount of Each Receipt this Period

50.00

payroll deduction

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

PRIME THERAPEUTICS LLC EMPLOYEE PAC (PRIMEPAC)

Full Name (Last, First, Middle Initial)

A. James DuCharme

Mailing Address 1305 corporate center dr

City State Zip Code
eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics LLC

Occupation

Chief Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 26 / 2014

Transaction ID : SA11AI.4990

Amount of Each Receipt this Period

50.00

payroll deduction

Full Name (Last, First, Middle Initial)

B. Stacey Fahrner

Mailing Address 6100 Nebraska Ave NW

City State Zip Code
Washington DC 20015

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

VP Government Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 03 / 2014

Transaction ID : SA11AI.4727

Amount of Each Receipt this Period

100.00

payroll deduction

Full Name (Last, First, Middle Initial)

C. Stacey Fahrner

Mailing Address 6100 Nebraska Ave NW

City State Zip Code
Washington DC 20015

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

VP Government Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 18 / 2014

Transaction ID : SA11AI.4771

Amount of Each Receipt this Period

100.00

payroll deduction

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

PRIME THERAPEUTICS LLC EMPLOYEE PAC (PRIMEPAC)

Full Name (Last, First, Middle Initial)

A. Stacey Fahrner

Mailing Address 6100 Nebraska Ave NW

City

Washington

State

DC

Zip Code

20015

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

VP Government Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

08 / 01 / 2014

Transaction ID : SA11AI.4816

Amount of Each Receipt this Period

100.00

payroll deduction

Full Name (Last, First, Middle Initial)

B. Stacey Fahrner

Mailing Address 6100 Nebraska Ave NW

City

Washington

State

DC

Zip Code

20015

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

VP Government Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1700.00

Date of Receipt

08 / 15 / 2014

Transaction ID : SA11AI.4817

Amount of Each Receipt this Period

100.00

payroll deduction

Full Name (Last, First, Middle Initial)

C. Stacey Fahrner

Mailing Address 6100 Nebraska Ave NW

City

Washington

State

DC

Zip Code

20015

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

VP Government Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

08 / 29 / 2014

Transaction ID : SA11AI.4897

Amount of Each Receipt this Period

100.00

payroll deduction

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)

PRIME THERAPEUTICS LLC EMPLOYEE PAC (PRIMEPAC)

Full Name (Last, First, Middle Initial)

A. Stacey Fahrner

Mailing Address 6100 Nebraska Ave NW

City State Zip Code
 Washington DC 20015

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

VP Government Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1900.00

Date of Receipt

09 / 12 / 2014

Transaction ID : SA11AI.4898

Amount of Each Receipt this Period

100.00

payroll deduction

Full Name (Last, First, Middle Initial)

B. Stacey Fahrner

Mailing Address 6100 Nebraska Ave NW

City State Zip Code
 Washington DC 20015

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

VP Government Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

09 / 26 / 2014

Transaction ID : SA11AI.4991

Amount of Each Receipt this Period

100.00

payroll deduction

Full Name (Last, First, Middle Initial)

C. Scott Fries

Mailing Address 1305 Corporate Center Dr

City State Zip Code
 Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Senior Vice President Government Progr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

840.00

Date of Receipt

07 / 03 / 2014

Transaction ID : SA11AI.4749

Amount of Each Receipt this Period

60.00

payroll deduction

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

260.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PRIME THERAPEUTICS LLC EMPLOYEE PAC (PRIMEPAC)

Full Name (Last, First, Middle Initial)

A. Scott Fries

Mailing Address 1305 Corporate Center Dr

City State Zip Code
 Eagan MN 55121

FEC ID number of contributing federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Senior Vice President Government Progr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 18 2014

Transaction ID : SA11AI.4793

Amount of Each Receipt this Period

60.00

payroll deduction

Full Name (Last, First, Middle Initial)

B. Scott Fries

Mailing Address 1305 Corporate Center Dr

City State Zip Code
 Eagan MN 55121

FEC ID number of contributing federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Senior Vice President Government Progr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 01 2014

Transaction ID : SA11AI.4818

Amount of Each Receipt this Period

60.00

payroll deduction

Full Name (Last, First, Middle Initial)

C. Scott Fries

Mailing Address 1305 Corporate Center Dr

City State Zip Code
 Eagan MN 55121

FEC ID number of contributing federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Senior Vice President Government Progr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1020.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 15 2014

Transaction ID : SA11AI.4819

Amount of Each Receipt this Period

60.00

payroll deduction

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

180.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PRIME THERAPEUTICS LLC EMPLOYEE PAC (PRIMEPAC)

Full Name (Last, First, Middle Initial)

A. Scott Fries

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Senior Vice President Government Progr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1080.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 29 2014

Transaction ID : SA11AI.4899

Amount of Each Receipt this Period

60.00

payroll deduction

Full Name (Last, First, Middle Initial)

B. Scott Fries

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Senior Vice President Government Progr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1140.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 12 2014

Transaction ID : SA11AI.4900

Amount of Each Receipt this Period

60.00

payroll deduction

Full Name (Last, First, Middle Initial)

C. Scott Fries

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Senior Vice President Government Progr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 26 2014

Transaction ID : SA11AI.4992

Amount of Each Receipt this Period

60.00

payroll deduction

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

180.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

PRIME THERAPEUTICS LLC EMPLOYEE PAC (PRIMEPAC)

Full Name (Last, First, Middle Initial)

A. Jean Hawkins-Koch

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Senior Director Client Engagement

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

MM / DD / YYYY
07 / 03 / 2014

Transaction ID : SA11AI.4744

Amount of Each Receipt this Period

20.00

payroll deduction

Full Name (Last, First, Middle Initial)

B. Jean Hawkins-Koch

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Senior Director Client Engagement

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY
07 / 18 / 2014

Transaction ID : SA11AI.4788

Amount of Each Receipt this Period

20.00

payroll deduction

Full Name (Last, First, Middle Initial)

C. Jean Hawkins-Koch

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Senior Director Client Engagement

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

MM / DD / YYYY
08 / 01 / 2014

Transaction ID : SA11AI.4824

Amount of Each Receipt this Period

20.00

payroll deduction

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 OF 70

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PRIME THERAPEUTICS LLC EMPLOYEE PAC (PRIMEPAC)

Full Name (Last, First, Middle Initial)

A. Jean Hawkins-Koch

Mailing Address 1305 Corporate Center Dr

City State Zip Code
 Eagan MN 55121

FEC ID number of contributing federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Senior Director Client Engagement

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 08 15 2014

Transaction ID : SA11AI.4825

Amount of Each Receipt this Period

20.00

payroll deduction

Full Name (Last, First, Middle Initial)

B. Jean Hawkins-Koch

Mailing Address 1305 Corporate Center Dr

City State Zip Code
 Eagan MN 55121

FEC ID number of contributing federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Senior Director Client Engagement

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 08 29 2014

Transaction ID : SA11AI.4905

Amount of Each Receipt this Period

20.00

payroll deduction

Full Name (Last, First, Middle Initial)

C. Jean Hawkins-Koch

Mailing Address 1305 Corporate Center Dr

City State Zip Code
 Eagan MN 55121

FEC ID number of contributing federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Senior Director Client Engagement

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 09 12 2014

Transaction ID : SA11AI.4906

Amount of Each Receipt this Period

20.00

payroll deduction

SUBTOTAL of Receipts This Page (optional)..... ►

60.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

PRIME THERAPEUTICS LLC EMPLOYEE PAC (PRIMEPAC)

Full Name (Last, First, Middle Initial)

A. Jean Hawkins-Koch

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Senior Director Client Engagement

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 26 / 2014

Transaction ID : SA11AI.4995

Amount of Each Receipt this Period

20.00

payroll deduction

Full Name (Last, First, Middle Initial)

B. Thomas Hoffman

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

General Manager Individual Market

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 03 / 2014

Transaction ID : SA11AI.4736

Amount of Each Receipt this Period

25.00

payroll deduction

Full Name (Last, First, Middle Initial)

C. Thomas Hoffman

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

General Manager Individual Market

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 18 / 2014

Transaction ID : SA11AI.4780

Amount of Each Receipt this Period

25.00

payroll deduction

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

70.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

PRIME THERAPEUTICS LLC EMPLOYEE PAC (PRIMEPAC)

Full Name (Last, First, Middle Initial)

A. Thomas Hoffman

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

General Manager Individual Market

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

08 / 01 / 2014

Transaction ID : SA11AI.4826

Amount of Each Receipt this Period

25.00

payroll deduction

Full Name (Last, First, Middle Initial)

B. Thomas Hoffman

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

General Manager Individual Market

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

08 / 15 / 2014

Transaction ID : SA11AI.4827

Amount of Each Receipt this Period

25.00

payroll deduction

Full Name (Last, First, Middle Initial)

C. Thomas Hoffman

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

General Manager Individual Market

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

08 / 29 / 2014

Transaction ID : SA11AI.4907

Amount of Each Receipt this Period

25.00

payroll deduction

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

PRIME THERAPEUTICS LLC EMPLOYEE PAC (PRIMEPAC)

Full Name (Last, First, Middle Initial)

A. Thomas Hoffman

Mailing Address 1305 Corporate Center Dr

City State Zip Code
 Eagan MN 55121

FEC ID number of contributing federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

General Manager Individual Market

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 09 12 2014

Transaction ID : SA11AI.4908

Amount of Each Receipt this Period

25.00

payroll deduction

Full Name (Last, First, Middle Initial)

B. Thomas Hoffman

Mailing Address 1305 Corporate Center Dr

City State Zip Code
 Eagan MN 55121

FEC ID number of contributing federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

General Manager Individual Market

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 09 26 2014

Transaction ID : SA11AI.4996

Amount of Each Receipt this Period

25.00

payroll deduction

Full Name (Last, First, Middle Initial)

C. Ellyn Hosch

Mailing Address 1305 Corporate Center Dr

City State Zip Code
 Eagan MN 55121

FEC ID number of contributing federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Chief Information Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 03 2014

Transaction ID : SA11AI.4722

Amount of Each Receipt this Period

25.00

payroll deduction

SUBTOTAL of Receipts This Page (optional)..... ►

75.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

PRIME THERAPEUTICS LLC EMPLOYEE PAC (PRIMEPAC)

Full Name (Last, First, Middle Initial)

A. Ellyn Hosch

Mailing Address 1305 Corporate Center Dr

City State Zip Code
 Eagan MN 55121

FEC ID number of contributing federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Chief Information Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 18 2014

Transaction ID : SA11AI.4765

Amount of Each Receipt this Period

25.00

payroll deduction

Full Name (Last, First, Middle Initial)

B. Ellyn Hosch

Mailing Address 1305 Corporate Center Dr

City State Zip Code
 Eagan MN 55121

FEC ID number of contributing federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Chief Information Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 08 01 2014

Transaction ID : SA11AI.4828

Amount of Each Receipt this Period

25.00

payroll deduction

Full Name (Last, First, Middle Initial)

C. Ellyn Hosch

Mailing Address 1305 Corporate Center Dr

City State Zip Code
 Eagan MN 55121

FEC ID number of contributing federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Chief Information Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 08 15 2014

Transaction ID : SA11AI.4829

Amount of Each Receipt this Period

25.00

payroll deduction

SUBTOTAL of Receipts This Page (optional)..... ►

75.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

PRIME THERAPEUTICS LLC EMPLOYEE PAC (PRIMEPAC)

Full Name (Last, First, Middle Initial)

A. Ellyn Hosch

Mailing Address 1305 Corporate Center Dr

City State Zip Code
 Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Chief Information Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

08 / 29 / 2014

Transaction ID : SA11AI.4909

Amount of Each Receipt this Period

25.00

payroll deduction

Full Name (Last, First, Middle Initial)

B. Ellyn Hosch

Mailing Address 1305 Corporate Center Dr

City State Zip Code
 Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Chief Information Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

09 / 12 / 2014

Transaction ID : SA11AI.4910

Amount of Each Receipt this Period

25.00

payroll deduction

Full Name (Last, First, Middle Initial)

C. Ellyn Hosch

Mailing Address 1305 Corporate Center Dr

City State Zip Code
 Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Chief Information Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 26 / 2014

Transaction ID : SA11AI.4997

Amount of Each Receipt this Period

25.00

payroll deduction

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

PRIME THERAPEUTICS LLC EMPLOYEE PAC (PRIMEPAC)

Full Name (Last, First, Middle Initial)

A. Robert Kelley

Mailing Address 1305 Corporate Center Dr

City State Zip Code
 Eagan MN 55121

FEC ID number of contributing federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Comptroller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
 07 / 03 / 2014

Transaction ID : SA11AI.4745

Amount of Each Receipt this Period

25.00

payroll deduction

Full Name (Last, First, Middle Initial)

B. Robert Kelley

Mailing Address 1305 Corporate Center Dr

City State Zip Code
 Eagan MN 55121

FEC ID number of contributing federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Comptroller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
 07 / 18 / 2014

Transaction ID : SA11AI.4789

Amount of Each Receipt this Period

25.00

payroll deduction

Full Name (Last, First, Middle Initial)

C. Robert Kelley

Mailing Address 1305 Corporate Center Dr

City State Zip Code
 Eagan MN 55121

FEC ID number of contributing federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Comptroller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
 08 / 01 / 2014

Transaction ID : SA11AI.4834

Amount of Each Receipt this Period

25.00

payroll deduction

SUBTOTAL of Receipts This Page (optional)..... ►

75.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

PRIME THERAPEUTICS LLC EMPLOYEE PAC (PRIMEPAC)

Full Name (Last, First, Middle Initial)

A. Robert Kelley

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Comptroller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

08 / 15 / 2014

Transaction ID : SA11AI.4835

Amount of Each Receipt this Period

25.00

payroll deduction

Full Name (Last, First, Middle Initial)

B. Robert Kelley

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Comptroller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

08 / 29 / 2014

Transaction ID : SA11AI.4915

Amount of Each Receipt this Period

25.00

payroll deduction

Full Name (Last, First, Middle Initial)

C. Robert Kelley

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Comptroller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

09 / 12 / 2014

Transaction ID : SA11AI.4916

Amount of Each Receipt this Period

25.00

payroll deduction

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

PRIME THERAPEUTICS LLC EMPLOYEE PAC (PRIMEPAC)

Full Name (Last, First, Middle Initial)

A. Robert Kelley

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Comptroller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 26 / 2014

Transaction ID : SA11AI.5000

Amount of Each Receipt this Period

25.00

payroll deduction

Full Name (Last, First, Middle Initial)

B. Kevin Krakowski

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

AVP Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 03 / 2014

Transaction ID : SA11AI.4715

Amount of Each Receipt this Period

25.00

payroll deduction

Full Name (Last, First, Middle Initial)

C. Kevin Krakowski

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

AVP Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 18 / 2014

Transaction ID : SA11AI.4757

Amount of Each Receipt this Period

25.00

payroll deduction

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

PRIME THERAPEUTICS LLC EMPLOYEE PAC (PRIMEPAC)

Full Name (Last, First, Middle Initial)

A. Kevin Krakowski

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

AVP Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

08 / 01 / 2014

Transaction ID : SA11AI.4838

Amount of Each Receipt this Period

25.00

payroll deduction

Full Name (Last, First, Middle Initial)

B. Kevin Krakowski

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

AVP Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

08 / 15 / 2014

Transaction ID : SA11AI.4839

Amount of Each Receipt this Period

25.00

payroll deduction

Full Name (Last, First, Middle Initial)

C. Kevin Krakowski

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

AVP Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

08 / 29 / 2014

Transaction ID : SA11AI.4919

Amount of Each Receipt this Period

25.00

payroll deduction

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

PRIME THERAPEUTICS LLC EMPLOYEE PAC (PRIMEPAC)

Full Name (Last, First, Middle Initial)

A. Kevin Krakowski

Mailing Address 1305 Corporate Center Dr

City State Zip Code
 Eagan MN 55121

FEC ID number of contributing federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

AVP Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y
 09 / 12 / 2014

Transaction ID : SA11AI.4920

Amount of Each Receipt this Period

25.00

payroll deduction

Full Name (Last, First, Middle Initial)

B. Kevin Krakowski

Mailing Address 1305 Corporate Center Dr

City State Zip Code
 Eagan MN 55121

FEC ID number of contributing federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

AVP Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 09 / 26 / 2014

Transaction ID : SA11AI.5002

Amount of Each Receipt this Period

25.00

payroll deduction

Full Name (Last, First, Middle Initial)

C. Raechele McMahan

Mailing Address 1305 Corporate Center Dr

City State Zip Code
 Eagan MN 55121

FEC ID number of contributing federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

455.00

Date of Receipt

M M / D D / Y Y Y Y Y
 07 / 03 / 2014

Transaction ID : SA11AI.4741

Amount of Each Receipt this Period

32.50

payroll deduction

SUBTOTAL of Receipts This Page (optional)..... ►

82.50

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

PRIME THERAPEUTICS LLC EMPLOYEE PAC (PRIMEPAC)

Full Name (Last, First, Middle Initial)

A. Raechele McMahan

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

487.50

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 18 / 2014

Transaction ID : SA11AI.4785

Amount of Each Receipt this Period

32.50

payroll deduction

Full Name (Last, First, Middle Initial)

B. Raechele McMahan

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 01 / 2014

Transaction ID : SA11AI.4842

Amount of Each Receipt this Period

32.50

payroll deduction

Full Name (Last, First, Middle Initial)

C. Raechele McMahan

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

552.50

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 15 / 2014

Transaction ID : SA11AI.4843

Amount of Each Receipt this Period

32.50

payroll deduction

SUBTOTAL of Receipts This Page (optional)..... ►

97.50

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

PRIME THERAPEUTICS LLC EMPLOYEE PAC (PRIMEPAC)

Full Name (Last, First, Middle Initial)

A. Raechele McMahan

Mailing Address 1305 Corporate Center Dr

City State Zip Code
 Eagan MN 55121

FEC ID number of contributing federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 08 29 2014

Transaction ID : SA11AI.4923

Amount of Each Receipt this Period

32.50

payroll deduction

Full Name (Last, First, Middle Initial)

B. Raechele McMahan

Mailing Address 1305 Corporate Center Dr

City State Zip Code
 Eagan MN 55121

FEC ID number of contributing federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

617.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 09 12 2014

Transaction ID : SA11AI.4924

Amount of Each Receipt this Period

32.50

payroll deduction

Full Name (Last, First, Middle Initial)

C. Raechele McMahan

Mailing Address 1305 Corporate Center Dr

City State Zip Code
 Eagan MN 55121

FEC ID number of contributing federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 09 26 2014

Transaction ID : SA11AI.5004

Amount of Each Receipt this Period

32.50

payroll deduction

SUBTOTAL of Receipts This Page (optional)..... ►

97.50

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

PRIME THERAPEUTICS LLC EMPLOYEE PAC (PRIMEPAC)

Full Name (Last, First, Middle Initial)

A. Nathan Meyer

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

VP enterprise planning

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 18 2014

Transaction ID : SA11AI.4762

Amount of Each Receipt this Period

75.00

payroll deduction

Full Name (Last, First, Middle Initial)

B. Nathan Meyer

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

VP enterprise planning

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

975.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 01 2014

Transaction ID : SA11AI.4846

Amount of Each Receipt this Period

75.00

payroll deduction

Full Name (Last, First, Middle Initial)

C. Nathan Meyer

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

VP enterprise planning

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 15 2014

Transaction ID : SA11AI.4847

Amount of Each Receipt this Period

75.00

payroll deduction

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

225.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

PRIME THERAPEUTICS LLC EMPLOYEE PAC (PRIMEPAC)

Full Name (Last, First, Middle Initial)

A. Nathan Meyer

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

VP enterprise planning

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1125.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2014

Transaction ID : SA11AI.4927

Amount of Each Receipt this Period

75.00

payroll deduction

Full Name (Last, First, Middle Initial)

B. Nathan Meyer

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

VP enterprise planning

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 12 / 2014

Transaction ID : SA11AI.4928

Amount of Each Receipt this Period

75.00

payroll deduction

Full Name (Last, First, Middle Initial)

C. Nathan Meyer

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

VP enterprise planning

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 26 / 2014

Transaction ID : SA11AI.5006

Amount of Each Receipt this Period

75.00

payroll deduction

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

225.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

PRIME THERAPEUTICS LLC EMPLOYEE PAC (PRIMEPAC)

Full Name (Last, First, Middle Initial)

A. Matthew Moran

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

VP Client Engagement

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 03 / 2014

Transaction ID : SA11AI.4718

Amount of Each Receipt this Period

25.00

payroll deduction

Full Name (Last, First, Middle Initial)

B. Matthew Moran

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

VP Client Engagement

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 18 / 2014

Transaction ID : SA11AI.4760

Amount of Each Receipt this Period

25.00

payroll deduction

Full Name (Last, First, Middle Initial)

C. Matthew Moran

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

VP Client Engagement

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 01 / 2014

Transaction ID : SA11AI.4848

Amount of Each Receipt this Period

25.00

payroll deduction

SUBTOTAL of Receipts This Page (optional)..... ►

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75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

PRIME THERAPEUTICS LLC EMPLOYEE PAC (PRIMEPAC)

Full Name (Last, First, Middle Initial)

A. Matthew Moran

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

VP Client Engagement

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

08 / 15 / 2014

Transaction ID : SA11AI.4849

Amount of Each Receipt this Period

25.00

payroll deduction

Full Name (Last, First, Middle Initial)

B. Matthew Moran

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

VP Client Engagement

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

08 / 29 / 2014

Transaction ID : SA11AI.4929

Amount of Each Receipt this Period

25.00

payroll deduction

Full Name (Last, First, Middle Initial)

C. Matthew Moran

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

VP Client Engagement

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

09 / 12 / 2014

Transaction ID : SA11AI.4930

Amount of Each Receipt this Period

25.00

payroll deduction

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

PRIME THERAPEUTICS LLC EMPLOYEE PAC (PRIMEPAC)

Full Name (Last, First, Middle Initial)

A. Matthew Moran

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

VP Client Engagement

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 26 / 2014

Transaction ID : SA11AI.5007

Amount of Each Receipt this Period

25.00

payroll deduction

Full Name (Last, First, Middle Initial)

B. Cameron Olig

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 03 / 2014

Transaction ID : SA11AI.4716

Amount of Each Receipt this Period

50.00

payroll deduction

Full Name (Last, First, Middle Initial)

C. Cameron Olig

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 18 / 2014

Transaction ID : SA11AI.4758

Amount of Each Receipt this Period

50.00

payroll deduction

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

125.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

PRIME THERAPEUTICS LLC EMPLOYEE PAC (PRIMEPAC)

Full Name (Last, First, Middle Initial)

A. Cameron Olig

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

08 / 01 / 2014

Transaction ID : SA11AI.4852

Amount of Each Receipt this Period

50.00

payroll deduction

Full Name (Last, First, Middle Initial)

B. Cameron Olig

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

08 / 15 / 2014

Transaction ID : SA11AI.4853

Amount of Each Receipt this Period

50.00

payroll deduction

Full Name (Last, First, Middle Initial)

C. Cameron Olig

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

08 / 29 / 2014

Transaction ID : SA11AI.4933

Amount of Each Receipt this Period

50.00

payroll deduction

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

PRIME THERAPEUTICS LLC EMPLOYEE PAC (PRIMEPAC)

Full Name (Last, First, Middle Initial)

A. Cameron Olig

Mailing Address 1305 Corporate Center Dr

City State Zip Code
 Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y
 09 / 12 / 2014

Transaction ID : SA11AI.4934

Amount of Each Receipt this Period

50.00

payroll deduction

Full Name (Last, First, Middle Initial)

B. Cameron Olig

Mailing Address 1305 Corporate Center Dr

City State Zip Code
 Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 09 / 26 / 2014

Transaction ID : SA11AI.5009

Amount of Each Receipt this Period

50.00

payroll deduction

Full Name (Last, First, Middle Initial)

C. Susan Patterson

Mailing Address 1305 Corporate Center Dr

City State Zip Code
 Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Regional Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
 07 / 03 / 2014

Transaction ID : SA11AI.4735

Amount of Each Receipt this Period

15.00

payroll deduction

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

115.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

PRIME THERAPEUTICS LLC EMPLOYEE PAC (PRIMEPAC)

Full Name (Last, First, Middle Initial)

A. Susan Patterson

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Regional Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 18 / 2014

Transaction ID : SA11AI.4779

Amount of Each Receipt this Period

15.00

payroll deduction

Full Name (Last, First, Middle Initial)

B. Susan Patterson

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Regional Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 01 / 2014

Transaction ID : SA11AI.4856

Amount of Each Receipt this Period

15.00

payroll deduction

Full Name (Last, First, Middle Initial)

C. Susan Patterson

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Regional Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 15 / 2014

Transaction ID : SA11AI.4857

Amount of Each Receipt this Period

15.00

payroll deduction

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

45.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

PRIME THERAPEUTICS LLC EMPLOYEE PAC (PRIMEPAC)

Full Name (Last, First, Middle Initial)

A. Susan Patterson

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Regional Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

08 / 29 / 2014

Transaction ID : SA11AI.4937

Amount of Each Receipt this Period

15.00

payroll deduction

Full Name (Last, First, Middle Initial)

B. Susan Patterson

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Regional Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

09 / 12 / 2014

Transaction ID : SA11AI.4938

Amount of Each Receipt this Period

15.00

payroll deduction

Full Name (Last, First, Middle Initial)

C. Susan Patterson

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Regional Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

09 / 26 / 2014

Transaction ID : SA11AI.5011

Amount of Each Receipt this Period

15.00

payroll deduction

SUBTOTAL of Receipts This Page (optional)..... ►

45.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

PRIME THERAPEUTICS LLC EMPLOYEE PAC (PRIMEPAC)

Full Name (Last, First, Middle Initial)

A. Aaron Rodriguez

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1344.00

Date of Receipt

07 / 03 / 2014

Transaction ID : SA11AI.4725

Amount of Each Receipt this Period

96.00

payroll deduction

Full Name (Last, First, Middle Initial)

B. Aaron Rodriguez

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1440.00

Date of Receipt

07 / 18 / 2014

Transaction ID : SA11AI.4769

Amount of Each Receipt this Period

96.00

payroll deduction

Full Name (Last, First, Middle Initial)

C. Aaron Rodriguez

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1536.00

Date of Receipt

08 / 01 / 2014

Transaction ID : SA11AI.4858

Amount of Each Receipt this Period

96.00

payroll deduction

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

288.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

PRIME THERAPEUTICS LLC EMPLOYEE PAC (PRIMEPAC)

Full Name (Last, First, Middle Initial)

A. Aaron Rodriguez

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1632.00

Date of Receipt

08 / 15 / 2014

Transaction ID : SA11AI.4859

Amount of Each Receipt this Period

96.00

payroll deduction

Full Name (Last, First, Middle Initial)

B. Aaron Rodriguez

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1728.00

Date of Receipt

08 / 29 / 2014

Transaction ID : SA11AI.4939

Amount of Each Receipt this Period

96.00

payroll deduction

Full Name (Last, First, Middle Initial)

C. Aaron Rodriguez

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1824.00

Date of Receipt

09 / 12 / 2014

Transaction ID : SA11AI.4940

Amount of Each Receipt this Period

96.00

payroll deduction

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

288.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

PRIME THERAPEUTICS LLC EMPLOYEE PAC (PRIMEPAC)

Full Name (Last, First, Middle Initial)

A. Aaron Rodriguez

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1920.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 26 / 2014

Transaction ID : SA11AI.5012

Amount of Each Receipt this Period

96.00

payroll deduction

Full Name (Last, First, Middle Initial)

B. David Root

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 15 / 2014

Transaction ID : SA11AI.4861

Amount of Each Receipt this Period

12.50

payroll deduction

Full Name (Last, First, Middle Initial)

C. David Root

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2014

Transaction ID : SA11AI.4941

Amount of Each Receipt this Period

12.50

payroll deduction

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

121.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

PRIME THERAPEUTICS LLC EMPLOYEE PAC (PRIMEPAC)

Full Name (Last, First, Middle Initial)

A. David Root

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

237.50

Date of Receipt

09 / 12 / 2014

Transaction ID : SA11AI.4942

Amount of Each Receipt this Period

12.50

payroll deduction

Full Name (Last, First, Middle Initial)

B. David Root

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 26 / 2014

Transaction ID : SA11AI.5013

Amount of Each Receipt this Period

12.50

payroll deduction

Full Name (Last, First, Middle Initial)

C. Shelley Sanchez

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

09 / 19 / 2014

Transaction ID : SA11AI.5208

Amount of Each Receipt this Period

400.00

Personal Check

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

425.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

PRIME THERAPEUTICS LLC EMPLOYEE PAC (PRIMEPAC)

Full Name (Last, First, Middle Initial)

A. Lisa Schissel

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Regional Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.50

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 15 / 2014

Transaction ID : SA11AI.4863

Amount of Each Receipt this Period

12.50

payroll deduction

Full Name (Last, First, Middle Initial)

B. Lisa Schissel

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Regional Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 29 / 2014

Transaction ID : SA11AI.4943

Amount of Each Receipt this Period

12.50

payroll deduction

Full Name (Last, First, Middle Initial)

C. Lisa Schissel

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Regional Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

237.50

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 12 / 2014

Transaction ID : SA11AI.4944

Amount of Each Receipt this Period

12.50

payroll deduction

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

37.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

PRIME THERAPEUTICS LLC EMPLOYEE PAC (PRIMEPAC)

Full Name (Last, First, Middle Initial)

A. Lisa Schissel

Mailing Address 1305 Corporate Center Dr

City State Zip Code
 Eagan MN 55121

FEC ID number of contributing federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Regional Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 09 26 2014

Transaction ID : SA11AI.5014

Amount of Each Receipt this Period

12.50

payroll deduction

Full Name (Last, First, Middle Initial)

B. Trent Seashore

Mailing Address 1305 Corporate Center Dr

City State Zip Code
 Eagan MN 55121

FEC ID number of contributing federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Vice President Enterprise Reporting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 03 2014

Transaction ID : SA11AI.4751

Amount of Each Receipt this Period

25.00

payroll deduction

Full Name (Last, First, Middle Initial)

C. Trent Seashore

Mailing Address 1305 Corporate Center Dr

City State Zip Code
 Eagan MN 55121

FEC ID number of contributing federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Vice President Enterprise Reporting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 18 2014

Transaction ID : SA11AI.4795

Amount of Each Receipt this Period

25.00

payroll deduction

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

62.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

PRIME THERAPEUTICS LLC EMPLOYEE PAC (PRIMEPAC)

Full Name (Last, First, Middle Initial)

A. Trent Seashore

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Vice President Enterprise Reporting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

08 / 01 / 2014

Transaction ID : SA11AI.4864

Amount of Each Receipt this Period

25.00

payroll deduction

Full Name (Last, First, Middle Initial)

B. Trent Seashore

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Vice President Enterprise Reporting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

08 / 15 / 2014

Transaction ID : SA11AI.4865

Amount of Each Receipt this Period

25.00

payroll deduction

Full Name (Last, First, Middle Initial)

C. Trent Seashore

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Vice President Enterprise Reporting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

08 / 29 / 2014

Transaction ID : SA11AI.4945

Amount of Each Receipt this Period

25.00

payroll deduction

SUBTOTAL of Receipts This Page (optional)..... ►

75.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

PRIME THERAPEUTICS LLC EMPLOYEE PAC (PRIMEPAC)

Full Name (Last, First, Middle Initial)

A. Trent Seashore

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Vice President Enterprise Reporting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

09 / 12 / 2014

Transaction ID : SA11AI.4946

Amount of Each Receipt this Period

25.00

payroll deduction

Full Name (Last, First, Middle Initial)

B. Trent Seashore

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Vice President Enterprise Reporting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 26 / 2014

Transaction ID : SA11AI.5015

Amount of Each Receipt this Period

25.00

payroll deduction

Full Name (Last, First, Middle Initial)

C. Damon Smith

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Vice President PBM Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

07 / 03 / 2014

Transaction ID : SA11AI.4713

Amount of Each Receipt this Period

25.00

payroll deduction

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

PRIME THERAPEUTICS LLC EMPLOYEE PAC (PRIMEPAC)

Full Name (Last, First, Middle Initial)

A. Damon Smith

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Vice President PBM Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 18 2014

Transaction ID : SA11AI.4755

Amount of Each Receipt this Period

25.00

payroll deduction

Full Name (Last, First, Middle Initial)

B. Damon Smith

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Vice President PBM Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 01 2014

Transaction ID : SA11AI.4866

Amount of Each Receipt this Period

25.00

payroll deduction

Full Name (Last, First, Middle Initial)

C. Damon Smith

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Vice President PBM Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 15 2014

Transaction ID : SA11AI.4867

Amount of Each Receipt this Period

25.00

payroll deduction

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

PRIME THERAPEUTICS LLC EMPLOYEE PAC (PRIMEPAC)

Full Name (Last, First, Middle Initial)

A. Damon Smith

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Vice President PBM Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

08 / 29 / 2014

Transaction ID : SA11AI.4947

Amount of Each Receipt this Period

25.00

payroll deduction

Full Name (Last, First, Middle Initial)

B. Damon Smith

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Vice President PBM Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

09 / 12 / 2014

Transaction ID : SA11AI.4948

Amount of Each Receipt this Period

25.00

payroll deduction

Full Name (Last, First, Middle Initial)

C. Damon Smith

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Vice President PBM Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 26 / 2014

Transaction ID : SA11AI.5016

Amount of Each Receipt this Period

25.00

payroll deduction

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

PRIME THERAPEUTICS LLC EMPLOYEE PAC (PRIMEPAC)

Full Name (Last, First, Middle Initial)

A. Leanne Thyken

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Chief Internal Auditor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 15 / 2014

Transaction ID : SA11AI.4871

Amount of Each Receipt this Period

12.50

payroll deduction

Full Name (Last, First, Middle Initial)

B. Leanne Thyken

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Chief Internal Auditor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2014

Transaction ID : SA11AI.4951

Amount of Each Receipt this Period

12.50

payroll deduction

Full Name (Last, First, Middle Initial)

C. Leanne Thyken

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Chief Internal Auditor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

237.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 12 / 2014

Transaction ID : SA11AI.4952

Amount of Each Receipt this Period

12.50

payroll deduction

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

37.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

PRIME THERAPEUTICS LLC EMPLOYEE PAC (PRIMEPAC)

Full Name (Last, First, Middle Initial)

A. Leanne Thyken

Mailing Address 1305 Corporate Center Dr

City State Zip Code
 Eagan MN 55121

FEC ID number of contributing federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Chief Internal Auditor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 09 26 2014

Transaction ID : SA11AI.5018

Amount of Each Receipt this Period

12.50

payroll deduction

Full Name (Last, First, Middle Initial)

B. Ann Tobin

Mailing Address 1305 Corporate Center Dr

City State Zip Code
 Eagan MN 55121

FEC ID number of contributing federal political committee.

C

Name of Employer

PrimeTherapeutics

Occupation

Chief Compliance Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 03 2014

Transaction ID : SA11AI.4743

Amount of Each Receipt this Period

19.25

payroll deduction

Full Name (Last, First, Middle Initial)

C. Ann Tobin

Mailing Address 1305 Corporate Center Dr

City State Zip Code
 Eagan MN 55121

FEC ID number of contributing federal political committee.

C

Name of Employer

PrimeTherapeutics

Occupation

Chief Compliance Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.75

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 18 2014

Transaction ID : SA11AI.4787

Amount of Each Receipt this Period

19.25

payroll deduction

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

51.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

PRIME THERAPEUTICS LLC EMPLOYEE PAC (PRIMEPAC)

Full Name (Last, First, Middle Initial)

A. Ann Tobin

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing federal political committee.

C

Name of Employer

PrimeTherapeutics

Occupation

Chief Compliance Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 01 / 2014

Transaction ID : SA11AI.4872

Amount of Each Receipt this Period

19.25

payroll deduction

Full Name (Last, First, Middle Initial)

B. Ann Tobin

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing federal political committee.

C

Name of Employer

PrimeTherapeutics

Occupation

Chief Compliance Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.25

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 15 / 2014

Transaction ID : SA11AI.4873

Amount of Each Receipt this Period

19.25

payroll deduction

Full Name (Last, First, Middle Initial)

C. Ann Tobin

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing federal political committee.

C

Name of Employer

PrimeTherapeutics

Occupation

Chief Compliance Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.50

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 29 / 2014

Transaction ID : SA11AI.4953

Amount of Each Receipt this Period

19.25

payroll deduction

SUBTOTAL of Receipts This Page (optional)..... ►

57.75

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

PRIME THERAPEUTICS LLC EMPLOYEE PAC (PRIMEPAC)

Full Name (Last, First, Middle Initial)

A. Ann Tobin

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

PrimeTherapeutics

Occupation

Chief Compliance Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.75

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 12 / 2014

Transaction ID : SA11AI.4954

Amount of Each Receipt this Period

19.25

payroll deduction

Full Name (Last, First, Middle Initial)

B. Ann Tobin

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

PrimeTherapeutics

Occupation

Chief Compliance Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 26 / 2014

Transaction ID : SA11AI.5019

Amount of Each Receipt this Period

19.25

payroll deduction

Full Name (Last, First, Middle Initial)

C. Peter Wickersham

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.76

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 03 / 2014

Transaction ID : SA11AI.4729

Amount of Each Receipt this Period

19.23

payroll deduction

SUBTOTAL of Receipts This Page (optional)..... ►

57.73

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

PRIME THERAPEUTICS LLC EMPLOYEE PAC (PRIMEPAC)

Full Name (Last, First, Middle Initial)

A. Peter Wickersham

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.99

Date of Receipt

M M / D D / Y Y Y Y Y
07 18 2014

Transaction ID : SA11AI.4773

Amount of Each Receipt this Period

19.23

payroll deduction

Full Name (Last, First, Middle Initial)

B. Peter Wickersham

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.22

Date of Receipt

M M / D D / Y Y Y Y Y
08 01 2014

Transaction ID : SA11AI.4874

Amount of Each Receipt this Period

19.23

payroll deduction

Full Name (Last, First, Middle Initial)

C. Peter Wickersham

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.45

Date of Receipt

M M / D D / Y Y Y Y Y
08 15 2014

Transaction ID : SA11AI.4875

Amount of Each Receipt this Period

19.23

payroll deduction

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

57.69

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

PRIME THERAPEUTICS LLC EMPLOYEE PAC (PRIMEPAC)

Full Name (Last, First, Middle Initial)

A. Peter Wickersham

Mailing Address 1305 Corporate Center Dr

City State Zip Code
 Eagan MN 55121

FEC ID number of contributing federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.68

Date of Receipt

M M / D D / Y Y Y Y Y
 08 29 2014

Transaction ID : SA11AI.4959

Amount of Each Receipt this Period

19.23

payroll deduction

Full Name (Last, First, Middle Initial)

B. Peter Wickersham

Mailing Address 1305 Corporate Center Dr

City State Zip Code
 Eagan MN 55121

FEC ID number of contributing federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

326.91

Date of Receipt

M M / D D / Y Y Y Y Y
 09 12 2014

Transaction ID : SA11AI.4960

Amount of Each Receipt this Period

19.23

payroll deduction

Full Name (Last, First, Middle Initial)

C. Peter Wickersham

Mailing Address 1305 Corporate Center Dr

City State Zip Code
 Eagan MN 55121

FEC ID number of contributing federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.14

Date of Receipt

M M / D D / Y Y Y Y Y
 09 26 2014

Transaction ID : SA11AI.5022

Amount of Each Receipt this Period

19.23

payroll deduction

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

57.69

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

PRIME THERAPEUTICS LLC EMPLOYEE PAC (PRIMEPAC)

Full Name (Last, First, Middle Initial)

A. Jay Witter

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

VP Pharmacy Networks

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

MM / DD / YYYY
07 / 03 / 2014

Transaction ID : SA11AI.4717

Amount of Each Receipt this Period

25.00

payroll deduction

Full Name (Last, First, Middle Initial)

B. Jay Witter

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

VP Pharmacy Networks

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

MM / DD / YYYY
07 / 18 / 2014

Transaction ID : SA11AI.4759

Amount of Each Receipt this Period

25.00

payroll deduction

Full Name (Last, First, Middle Initial)

C. Jay Witter

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

VP Pharmacy Networks

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY
08 / 01 / 2014

Transaction ID : SA11AI.4876

Amount of Each Receipt this Period

25.00

payroll deduction

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

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NAME OF COMMITTEE (In Full)

PRIME THERAPEUTICS LLC EMPLOYEE PAC (PRIMEPAC)

Full Name (Last, First, Middle Initial)

A. Jay Witter

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

VP Pharmacy Networks

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

08 / 15 / 2014

Transaction ID : SA11AI.4877

Amount of Each Receipt this Period

25.00

payroll deduction

Full Name (Last, First, Middle Initial)

B. Jay Witter

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

VP Pharmacy Networks

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

08 / 29 / 2014

Transaction ID : SA11AI.4961

Amount of Each Receipt this Period

25.00

payroll deduction

Full Name (Last, First, Middle Initial)

C. Jay Witter

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

VP Pharmacy Networks

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

09 / 12 / 2014

Transaction ID : SA11AI.4962

Amount of Each Receipt this Period

25.00

payroll deduction

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

PRIME THERAPEUTICS LLC EMPLOYEE PAC (PRIMEPAC)

Full Name (Last, First, Middle Initial)

A. Jay Witter

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

VP Pharmacy Networks

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 26 / 2014

Transaction ID : SA11AI.5023

Amount of Each Receipt this Period

25.00

payroll deduction

Full Name (Last, First, Middle Initial)

B. Barb Wood

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Associate General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 03 / 2014

Transaction ID : SA11AI.4732

Amount of Each Receipt this Period

25.00

payroll deduction

Full Name (Last, First, Middle Initial)

C. Barb Wood

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Associate General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 18 / 2014

Transaction ID : SA11AI.4776

Amount of Each Receipt this Period

25.00

payroll deduction

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

PRIME THERAPEUTICS LLC EMPLOYEE PAC (PRIMEPAC)

Full Name (Last, First, Middle Initial)

A. Barb Wood

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Associate General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

08 / 01 / 2014

Transaction ID : SA11AI.4878

Amount of Each Receipt this Period

25.00

payroll deduction

Full Name (Last, First, Middle Initial)

B. Barb Wood

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Associate General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

08 / 15 / 2014

Transaction ID : SA11AI.4879

Amount of Each Receipt this Period

25.00

payroll deduction

Full Name (Last, First, Middle Initial)

C. Barb Wood

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Associate General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

08 / 29 / 2014

Transaction ID : SA11AI.4963

Amount of Each Receipt this Period

25.00

payroll deduction

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

PRIME THERAPEUTICS LLC EMPLOYEE PAC (PRIMEPAC)

Full Name (Last, First, Middle Initial)

A. Barb Wood

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Associate General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 12 / 2014

Transaction ID : SA11AI.4964

Amount of Each Receipt this Period

25.00

payroll deduction

Full Name (Last, First, Middle Initial)

B. Barb Wood

Mailing Address 1305 Corporate Center Dr

City State Zip Code
Eagan MN 55121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Therapeutics

Occupation

Associate General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 26 / 2014

Transaction ID : SA11AI.5024

Amount of Each Receipt this Period

25.00

payroll deduction

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

50.00

7692.53

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

PRIME THERAPEUTICS LLC EMPLOYEE PAC (PRIMEPAC)

Full Name (Last, First, Middle Initial)

A. Prime Therapeutics LLC

Mailing Address 1305 Corporate Center Dr

City Eagan State MN Zip Code 55121

Purpose of Disbursement
admin fees - chargeback

001

Candidate Name

Category/
Type
Office Sought: ☐ House
 ☐ Senate
 ☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 02 2014
Transaction ID : SB21B.4971

Amount of Each Disbursement this Period

45.60

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: ☐ House
 ☐ Senate
 ☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: ☐ House
 ☐ Senate
 ☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

45.60

45.60

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PRIME THERAPEUTICS LLC EMPLOYEE PAC (PRIMEPAC)

Full Name (Last, First, Middle Initial)

A. John CORNYN

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		26		2014

Mailing Address PO BOX 13026

City	State	Zip Code
AUSTIN	TX	78711

Transaction ID : SB23.4979

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

2500.00

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: TX District: 00

Full Name (Last, First, Middle Initial)

B. AL FRANKEN FOR SENATE 2014

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		30		2014

Mailing Address PO BOX 583144

City	State	Zip Code
MINNEAPOLIS	MN	55458

Transaction ID : SB23.5028

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

2500.00

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: MN District: 00

Full Name (Last, First, Middle Initial)

C. KENNY E MR. MARCHANT

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		18		2014

Mailing Address PO BOX 110187

City	State	Zip Code
CARROLLTON	TX	75011

Transaction ID : SB23.4977

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

1000.00

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: TX District: 24

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6000.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PRIME THERAPEUTICS LLC EMPLOYEE PAC (PRIMEPAC)

Full Name (Last, First, Middle Initial)

A. KENNY E MR. MARCHANT

Mailing Address PO BOX 110187

City	State	Zip Code
CARROLLTON	TX	75011

Purpose of Disbursement

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: TX District: 24

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	30	/	2014

Transaction ID : SB23.5025

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. BILL NELSON FOR U S SENATE

Mailing Address 972 W WHITMIRE DRIVE

City	State	Zip Code
MELBOURNE	FL	32935

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

State: FL District: 00

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	28	/	2014

Transaction ID : SB23.4982

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Tom UDALL FOR US ALL

Mailing Address PO BOX 25766

City	State	Zip Code
ALBUQUERQUE	NM	87125

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

State: NM District: 03

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07	/	02	/	2014

Transaction ID : SB23.4974

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3500.00

9500.00
